

**COLLIN COUNTY  
PERSONNEL ACTION FORM**

NAME: <b>BIDDICK</b> <b>TERESA</b> <b>GAIL</b>			DATE: 4-12-89
LAST FIRST MIDDLE			DEPARTMENT: Public Works
SOCIAL SEC. NO.: 447-58-8393			

<b>EMPLOYMENT</b>	Employment Date: 10-16-88	Job Title: Landscape Architect (Temp.Full-Time)		SALARY: \$16.15 p/h
	Previously Employed:	Original Employment Date:	Separation Date:	Supervisor:
ELIGIBILITY DATES: (For Office Use Only)		Vacation Days:	Sick Leave:	Insurance: (Medical)
		Self	Dependents	

<b>Salary and/or title change</b>	Current Job Title	Current Salary	Range	Step
	New Job Title	New Salary	Range	Step
Reason: <input type="checkbox"/> Satisfactory Performance <input type="checkbox"/> Unsatisfactory Performance <input type="checkbox"/> Exceptional Merit				

<b>TRANSFER</b>	FROM:	TO:	<b>SICK LEAVE</b>	Dates of Sick Leave:
	FROM:	TO:		Previous Days Sick Leave Taken This Year:
<b>LEAVE OF ABSENCE Give Reason</b>	DATE:	<input type="checkbox"/> Ins. Notified		Was Doctor's Statement Furnished? <input type="checkbox"/> Yes <input type="checkbox"/> No
RETURN				

<b>VACATION</b>	Date Requested - From:	To:	Total Work Days Away	Previous Days Taken This Year
	Employment Date	Last Day Worked	Rehire? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain	
<b>SEPARATION</b>	Vac. Pay No. Hrs.	Amt. Paid	Comp. Pay No. Hrs.	Amt. Paid

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Voluntary Retirement             | <input type="checkbox"/> Return To School                | <input type="checkbox"/> Insubordination                        |
| <input type="checkbox"/> Mandatory Retirement. Co. Policy | <input type="checkbox"/> Family Problems                 | <input type="checkbox"/> Reporting Under Influence of Alcohol   |
| <input type="checkbox"/> Death                            | <input type="checkbox"/> Resignation For Other Reasons   | <input type="checkbox"/> Drinking On Duty                       |
| <input type="checkbox"/> Illness or Injury                | <input type="checkbox"/> Reduction In Force              | <input type="checkbox"/> Destruction or Removal Of Co. Property |
| <input type="checkbox"/> Leaving Area                     | <input type="checkbox"/> Habitually Absent or Tardy      | <input type="checkbox"/> Falsification of County Records        |
| <input type="checkbox"/> Accept Other Job                 | <input type="checkbox"/> Unreported Absence              | <input type="checkbox"/> Misconduct                             |
| <input type="checkbox"/> Dissatisfied                     | <input type="checkbox"/> Leaving Work Without Permission | <input type="checkbox"/> Other (Explain in comments)            |

How Many Days Advance Notice Given?

COMMENTS: Extend period of employment through September 30, 1989.

Dated this 17th day of April, 19 89

EFFECTIVE DATE: 5-1-89

Wm J Roberts  
COUNTY JUDGE

DATE  
4-11-89  
DATE

EMPLOYEE (IF APPLICABLE)  
J. Daugherty  
DEPARTMENT HEAD